

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Keep Conservatives United

ADDRESS (number and street)

9660 Falls of Neuse Rd

Ste 138, PMB 184

☐ Check if different than previously reported. (ACC)

Raleigh

NC

27615

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00499525

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☒ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Bob Harris

Signature of Treasurer

Bob Harris

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Keep Conservatives United

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 07 01 2011

To:

 M M / D D / Y Y Y Y Y
 12 31 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2011		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19)	13162.43	13162.43
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	13162.43	13162.43
7. Total Disbursements (from Line 31)	13014.87	13014.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	147.56	147.56
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	6500.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Keep Conservatives United

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
07 01 2011

To:

M M / D D / Y Y Y Y Y
12 31 2011
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

6552.43

6552.43

(ii) Unitemized

110.00

110.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

6662.43

6662.43

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

6662.43

6662.43

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

6500.00

6500.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ▶

13162.43

13162.43

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

13162.43

13162.43

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	6871.22	6871.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6871.22	6871.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	6143.65	6143.65
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	13014.87	13014.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13014.87	13014.87

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6662.43	6662.43
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6662.43	6662.43
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	6871.22	6871.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	6871.22	6871.22

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3XN
Transaction ID :

Multiple Independent Expenditures were paid directly by an individual and considered an in-kind donation to the PAC.
I have additionally listed these payments made by this donor as memo entries on line 24 to show the independent expenditure.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 32

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Keep Conservatives United

Full Name (Last, First, Middle Initial)

A. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

07 / 12 / 2011

Transaction ID : SA11AI.4160

Amount of Each Receipt this Period

1350.00

In-kind - PAC Website Video Production (See Line 24
Digifonics, Inc.)

Full Name (Last, First, Middle Initial)

B. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

07 / 27 / 2011

Transaction ID : SA11AI.4158

Amount of Each Receipt this Period

1350.00

In-kind - PAC Website Video Production (See Line 24
Digifonics, Inc.)

Full Name (Last, First, Middle Initial)

C. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3150.00

Date of Receipt

08 / 08 / 2011

Transaction ID : SA11AI.4156

Amount of Each Receipt this Period

450.00

In-kind - PAC Website Video Production (Digifonics,
Inc.)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Keep Conservatives United

Full Name (Last, First, Middle Initial)

A. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6661.32

Date of Receipt

08 / 30 / 2011

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period

11.32

In-kind - PAC Fundraising Facebook Links

Full Name (Last, First, Middle Initial)

B. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6705.37

Date of Receipt

09 / 01 / 2011

Transaction ID : SA11AI.4141

Amount of Each Receipt this Period

44.05

In-kind - PAC Postage/Printing/Mailing Services

Full Name (Last, First, Middle Initial)

C. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9716.88

Date of Receipt

09 / 06 / 2011

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period

11.51

In-kind - PAC Fundraising Facebook Links

SUBTOTAL of Receipts This Page (optional)..... ►

66.88

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Keep Conservatives United

Full Name (Last, First, Middle Initial)

A. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9761.13

Date of Receipt

09 / 10 / 2011

Transaction ID : SA11AI.4138

Amount of Each Receipt this Period

44.25

In-kind - PAC Fundraising Facebook Links

Full Name (Last, First, Middle Initial)

B. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11261.13

Date of Receipt

09 / 12 / 2011

Transaction ID : SA11AI.4143

Amount of Each Receipt this Period

1500.00

In-kind - PAC TV Advertising (Reimbursements listed on line 24)

Full Name (Last, First, Middle Initial)

C. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11306.55

Date of Receipt

09 / 13 / 2011

Transaction ID : SA11AI.4136

Amount of Each Receipt this Period

45.42

In-kind - PAC Fundraising Facebook Links

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1589.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Keep Conservatives United

Full Name (Last, First, Middle Initial)

A. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11348.08

Date of Receipt

09 / 14 / 2011

Transaction ID : SA11AI.4134

Amount of Each Receipt this Period

41.53

In-kind - PAC Fundraising Facebook Links

Full Name (Last, First, Middle Initial)

B. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11378.44

Date of Receipt

09 / 16 / 2011

Transaction ID : SA11AI.4132

Amount of Each Receipt this Period

30.36

In-kind - PAC Fundraising Facebook Links

Full Name (Last, First, Middle Initial)

C. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11415.15

Date of Receipt

09 / 17 / 2011

Transaction ID : SA11AI.4130

Amount of Each Receipt this Period

36.71

In-kind - PAC Fundraising Facebook Links

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Keep Conservatives United

Full Name (Last, First, Middle Initial)

A. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11440.99

Date of Receipt

09 / 19 / 2011

Transaction ID : SA11AI.4128

Amount of Each Receipt this Period

25.84

In-kind - PAC Fundraising Facebook Links

Full Name (Last, First, Middle Initial)

B. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12790.99

Date of Receipt

09 / 22 / 2011

Transaction ID : SA11AI.4170

Amount of Each Receipt this Period

1350.00

In-kind - PAC TV Advertising Production (See Line 24 Digifonics, Inc.)

Full Name (Last, First, Middle Initial)

C. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12802.43

Date of Receipt

10 / 03 / 2011

Transaction ID : SA11AI.4165

Amount of Each Receipt this Period

11.44

In-kind - PAC Fundraising Facebook Links

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1387.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Keep Conservatives United

Full Name (Last, First, Middle Initial)

A. Robert S Lemer

Mailing Address 13603 Apple Tree

City

Houston

State

TX

Zip Code

77079

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : SA11AI.4112

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

6552.43

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 32

☐ 11a ☐ 11b ☐ 11c ☐ 12
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Keep Conservatives United

Full Name (Last, First, Middle Initial)

A. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6650.00

Date of Receipt

08 / 30 / 2011

Transaction ID : SA13.4103

Amount of Each Receipt this Period

3500.00

Loan

Full Name (Last, First, Middle Initial)

B. Bob Harris

Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Research Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9705.37

Date of Receipt

09 / 03 / 2011

Transaction ID : SA13.4104

Amount of Each Receipt this Period

3000.00

Loan

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6500.00

6500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 32

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Keep Conservatives United

Full Name (Last, First, Middle Initial)

A. CM&Co, LLC

Mailing Address PO Box 97275

City Raleigh State NC Zip Code 27624

Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2011
Transaction ID : SB21B.4183

Amount of Each Disbursement this Period

562.74

Full Name (Last, First, Middle Initial)

B. Bob HarrisMailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

Purpose of Disbursement
In-kind - PAC Website Video Production (See Line 24 Digifonics, Inc.)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2011
Transaction ID : SB21B.4161

Amount of Each Disbursement this Period

1350.00

Full Name (Last, First, Middle Initial)

C. Bob HarrisMailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh State NC Zip Code 27615

Purpose of Disbursement
In-kind - PAC Website Video Production (See Line 24 Digifonics, Inc.)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 27 / 2011
Transaction ID : SB21B.4159

Amount of Each Disbursement this Period

1350.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3262.74

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 20 OF 32

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4103

Keep Conservatives United

LOAN SOURCE Full Name (Last, First, Middle Initial)

Bob Harris

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh

State NC

ZIP Code 27615

Original Amount of Loan

3500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3500.00

TERMS

Date Incurred

M M M / D D D / Y Y Y Y Y
08 / 30 / 2011

Date Due

M M M / D D D / Y Y Y Y Y

ON DEMAND

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 21 OF 32

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4104

Keep Conservatives United

LOAN SOURCE Full Name (Last, First, Middle Initial)

Bob Harris

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 9660 Falls of Neuse Rd
Ste 138, PMB 184

City Raleigh

State NC

ZIP Code 27615

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

TERMS

Date Incurred

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2011

Date Due

M M M / D D D / Y Y Y Y Y Y

ON DEMAND

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3000.00

TOTALS This Period (last page in this line only)..... ►

6500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 22 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00499525 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Citadel Broadcasting [MEMO ITEM]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">14</div> <div style="border: 1px solid black; padding: 2px;">2011</div> </div>	
Mailing Address 4230 Faber Place Dr Suite 100		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">375.00</div>	
City North Charleston	State SC		
Purpose of Expenditure PAC Radio Advertising - Reference Bob Harris Reimbursement		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Michele Bachmann		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Citadel Broadcasting [MEMO ITEM]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">14</div> <div style="border: 1px solid black; padding: 2px;">2011</div> </div>	
Mailing Address 4230 Faber Place Dr Suite 100		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">375.00</div>	
City North Charleston	State SC		
Purpose of Expenditure PAC Radio Advertising - Reference Bob Harris Reimbursement		Category/ Type	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bob Harris

[Electronically Filed]

Date

Signature

01

11

2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 23 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00499525 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Digifonics, Inc. [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 07 / 12 / 2011 </div>	
Mailing Address 1632 Pricewood		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 675.00 </div>	
City Apex	State NC		
Purpose of Expenditure PAC Website Video Production (50% of Inkind from Bob Harris)		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: SC District:
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5 5 675.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.4155

Full Name (Last, First, Middle Initial) of Payee Digifonics, Inc. [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 07 / 12 / 2011 </div>	
Mailing Address 1632 Pricewood		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 675.00 </div>	
City Apex	State NC		
Purpose of Expenditure PAC Website Video Production (50% of Inkind from Bob Harris)		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IA District:
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5 5 675.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.4174

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bob Harris

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y
 01 / 11 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 24 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00499525 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Digifonics, Inc. [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 07 / 27 / 2011 </div>	
Mailing Address 1632 Pricewood		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 675.00 </div>	
City Apex	State NC		
Purpose of Expenditure PAC Website Video Production (50% of Inkind from Bob Harris)		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: SC District:
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.4154

Full Name (Last, First, Middle Initial) of Payee Digifonics, Inc. [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 07 / 27 / 2011 </div>	
Mailing Address 1632 Pricewood		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 675.00 </div>	
City Apex	State NC		
Purpose of Expenditure PAC Website Video Production (50% of Inkind from Bob Harris)		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IA District:
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.4175

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bob Harris

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y
 01 / 11 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 25 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00499525 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Digifonics, Inc. [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 08 / 08 / 2011 </div>	
Mailing Address 1632 Pricewood		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 225.00 </div>	
City Apex	State NC		
Purpose of Expenditure PAC Website Video Production (50% of Inkind from Bob Harris)		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: SC District:
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.4153

Full Name (Last, First, Middle Initial) of Payee Digifonics, Inc. [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 08 / 08 / 2011 </div>	
Mailing Address 1632 Pricewood		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 225.00 </div>	
City Apex	State NC		
Purpose of Expenditure PAC Website Video Production (50% of Inkind from Bob Harris)		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IA District:
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.4176

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bob Harris

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y
 01 / 11 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 26 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00499525 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Digifonics, Inc.		Date 09 / 07 / 2011	
Mailing Address 1632 Pricewood		Amount 1080.00	
City Apex	State NC		
Purpose of Expenditure PAC TV Advertising Production		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: SC District:
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3597.65		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.4116

Full Name (Last, First, Middle Initial) of Payee Digifonics, Inc.		Date 09 / 07 / 2011	
Mailing Address 1632 Pricewood		Amount 270.00	
City Apex	State NC		
Purpose of Expenditure PAC TV Advertising Production		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: SC District:
Name of Federal Candidate Supported or Opposed by Expenditure: Michele Bachmann		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3867.65		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.4118

(a) SUBTOTAL of Itemized Independent Expenditures.....	1350.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bob Harris

[Electronically Filed]

Signature

Date

01 / 11 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 27 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00499525 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name (Last, First, Middle Initial) of Payee Digifonics, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY </div>
Mailing Address 1632 Pricewood		Amount <div style="border: 1px solid black; padding: 2px;"> 200.00 </div>
City Apex	State NC	
Zip Code 27502		Transaction ID : SE.4149
Purpose of Expenditure PAC TV Advertising Production	Category/ Type 	Office Sought: <input type="checkbox"/> House State: <u>SC</u> <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Michele Bachmann		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 5567.65		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Digifonics, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY </div>
Mailing Address 1632 Pricewood		Amount <div style="border: 1px solid black; padding: 2px;"> 200.00 </div>
City Apex	State NC	
Zip Code 27502		Transaction ID : SE.4150
Purpose of Expenditure PAC TV Advertising Production	Category/ Type 	Office Sought: <input type="checkbox"/> House State: <u>SC</u> <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 5767.65		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 400.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bob Harris

[Electronically Filed]

Date

MM / DD / YYYY

Signature

Full Name (Last, First, Middle Initial) of Payee Bob Harris		Date <div> <div>MM/09</div> <div>DD/14</div> <div>YYYY/2011</div> </div>	
Mailing Address 9660 Falls of Neuse Rd Ste 138, PMB 184		Amount <div> <div></div> <div>375.00</div> </div>	
City Raleigh	State NC	Zip Code 27615	Transaction ID : SE.4145
Purpose of Expenditure Reimbursement for PAC Radio Advertising (WIS Radio)	Category/ Type	Office Sought: <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President </div>	
Name of Federal Candidate Supported or Opposed by Expenditure: Michele Bachmann		District: _____ Check One: <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div>	
Calendar Year-To-Date Per Election for Office Sought	<div> <div></div> <div>4242.65</div> </div>		
		Disbursement For: <div> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	375.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 29 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00499525 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Bob Harris		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 14 / 2011 </div>
Mailing Address 9660 Falls of Neuse Rd Ste 138, PMB 184		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 375.00 </div>
City Raleigh State NC Zip Code 27615		
Purpose of Expenditure Reimbursement for PAC Radio Advertising (WIS Radio)	Category/Type 	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 4617.65		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.4146

Full Name (Last, First, Middle Initial) of Payee Bob Harris		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 14 / 2011 </div>
Mailing Address 9660 Falls of Neuse Rd Ste 138, PMB 184		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 375.00 </div>
City Raleigh State NC Zip Code 27615		
Purpose of Expenditure Reimbursement for PAC Radio Advertising (Citadel Broadcasting)	Category/Type 	Office Sought: <input type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Michele Bachmann		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 4992.65		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.4147

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 750.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 750.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bob Harris

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y
 01 / 11 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 30 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00499525 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Bob Harris		Date MM / DD / YYYY 09 / 14 / 2011	
Mailing Address 9660 Falls of Neuse Rd Ste 138, PMB 184		Amount 375.00	
City Raleigh	State NC	Zip Code 27615	Transaction ID : SE.4148
Purpose of Expenditure Reimbursement for PAC Radio Advertising (Citadel Broadcasting)		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: SC District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5367.65		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee OnMedia		Date MM / DD / YYYY 09 / 22 / 2011	
Mailing Address 212 W 2nd St		Amount 1951.00	
City CCedar Falls	State IA	Zip Code 50613	Transaction ID : SE.4151
Purpose of Expenditure PAC TV Advertising		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3526.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2326.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Bob Harris

Signature

[Electronically Filed]

Date

MM / DD / YYYY
01 / 11 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 31 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00499525 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Time Warner Cable		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 07 / 2011 </div>
Mailing Address 1333 Morganton Rd Suite C		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 754.12 </div>
City Fayetteville	State NC	
Purpose of Expenditure PAC TV Advertising	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: SC District:
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2329.12 </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : SE.4105

Full Name (Last, First, Middle Initial) of Payee Time Warner Cable		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 07 / 2011 </div>
Mailing Address 1333 Morganton Rd Suite C		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 188.53 </div>
City Fayetteville	State NC	
Purpose of Expenditure PAC TV Advertising	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: SC District:
Name of Federal Candidate Supported or Opposed by Expenditure: Michele Bachmann		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2517.65 </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : SE.4107

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 942.65 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 942.65 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bob Harris

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y
 01 / 11 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 32 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Keep Conservatives United	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00499525 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee WIS Radio [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 14 / 2011 </div>	
Mailing Address PO Box 5106		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 375.00 </div>	
City Cola	State SC		
Purpose of Expenditure PAC Radio Advertising - Reference Bob Harris Reimbursement		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: SC District:
Name of Federal Candidate Supported or Opposed by Expenditure: James R Perry		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.4179

Full Name (Last, First, Middle Initial) of Payee WIS Radio [MEMO ITEM]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 14 / 2011 </div>	
Mailing Address PO Box 5106		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 375.00 </div>	
City Cola	State SC		
Purpose of Expenditure PAC Radio Advertising - Reference Bob Harris Reimbursement		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: SC District:
Name of Federal Candidate Supported or Opposed by Expenditure: Michele Bachmann		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.4180

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 6143.65 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bob Harris

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y
 01 / 11 / 2012